

Flathead County

Planning & Zoning

40 11th Street West, Suite 220 Kalispell, MT 59901 Telephone 406.751.8200 Fax 406.751.8210

CONDITIONAL USE PERMIT APPLICATION

Submit this application, all required information, and appropriate fee (see current fee schedu to the Planning & Zoning office at the address listed above. FEE ATTACHED'\$

PROPOSED USE (as described in the Flathead County Zoning Regulations):		
RV, Boat and N	Vini Storage	
· · · · · · · · · · · · · · · · · · ·		
OWNER(S) OF RECORD:	(4.4) 2-3 -2 -	
Name: James belormino	Phone (406)858-0365	
Mailing Address: P.O. Box 895		
City, State, Zip Code: Valished MT	59903	
Email: J. belormino ince quail com		
PERSON(S) AUTHORIZED TO REPRESENT THE OWNER(S) AND TO WHOM ALL CORRESPONDENCE IS TO BE SENT:		
Name: Same	Phone:	
Mailing Address:		
City, State, Zip Code:		
Email:		
LEGAL DESCRIPTION OF PROPERTY (Refer to Property Records):		
Street Address: 628W/11 dw 6 (en Dr.		
Subdivision Name: <u>breenactes</u>	Tract Lot Block No(s) No(s) No	
Name: <u>GreenactesLot/2</u>	No(s) No	
1. Zoning District and Zoning Classification in which use is proposed (EXAMPLE: Bigfork Zoning District,		
SAG-5 zoning classification):		
Ralispell Zaning	District	
R-5		
	he required criteria below. ALL CRITERIA MUST BE	
	LICABLE, PLEASE EXPLAIN WHY. Attach drawings,	

additional text, site plans, and any other documents that will assist staff in reviewing the proposed use. The more information you can provide, the easier it is for staff to review the application. Please discuss:

Revised: 11.4.19

2. Water

No water services will be utilized.

3. Storm water drainage

All storm water will be effectively directed towards landscaped areas around property. In ground drain basins will be installed as well for precipitation from roof gutters.

4. Fire protection

Building will be engineered and constructed to current state building codes. Subject property is located within the South Kalispell Fire Department 0.6 miles, and would respond in the event of fire or emergency.

5. Police protection

Property is within service of Flathead County Sherriff office.

6. Streets

The buildings will be accessed off Haven Drive, Secondary cross street is Willow Glen or South Woodland.

- D. Immediate neighborhood impact
- 1. Excessive traffic generation

The proposed use will not be detrimental to surrounding neighborhoods in general. Access to property by storage tenants will be minimal.

2. Noise or vibration

Due to infrequent access to property, noise or vibration would be minimal

3. Dust, glare or heat

Dust, glare or heat will not be generated (post construction). Building materials will be neutral in color.

- 4. It is not expected that the proposed use would generate smoke, fumes, gas or odors.
- 5. Inappropriate hours of operation

Access to property will be 7 day/week, within acceptable business hours due to residential nature of area.

A. Site Suitability

1. Adequate usable space

Subject property is approx. 65000 sq ft which is adequate space perzoning for proposed buildings. Site plan allows for adequate setbacks. The proposed buildings will occupy 28150 sq ft of property.

2. Adequate access

Vehicles will enter property via an existing approach on the east portion of Haven Drive, continuing through property, and exiting through approach further west to Haven Drive.

3. Absence of environmental constraints

Property area is flat without elevation changes and is not in 100 or 500 yr flood plain per FEMA. There appears to be no environmental concerns with proposed building.

- B. Appropriateness of Design
- 1. Parking Scheme

There will be no permanent parking outside of storage.

2. Traffic circulation

Vehicles will enter property via and existing approach on the east portion of East Haven Dr, continuing out one way through property, and exiting through approach further west onto East Haven Dr.

3. Open Space

Gravel drive way with grass vegetation along Haven Dr and along setbacks.

4. Fencing, screening

Chain link fencing with coded access to storage buildings.

Landscaping

Gravel drive way with grass vegetation along Haven Dr and along setbacks.

6. Signage

If any signs are installed, they would conform to standards for this district.

7. Lighting

Any and all lighting installed will be shield and directed onto subject property.

- C. Availability of Public Service and Facilities
- 1. Sewer

No sewer will be utilized.

- 4.07 Contractors Storage Yard in AG and SAG Districts
- 4.08 Day Care Centers- 13 or More Individuals
- 4.09 Electrical Distribution Stations
- 4.10 Extractive Industries
- 4.11 Family Hardship Dwellings
- 4.12 Manufactured Home Parks
- 4.13 Mini-Storage, Recreational Vehicle Storage
- 4.14 Motor Coach Subdivisions
- 4.15 Recreational Facilities (see also 7.17.040)
- 4.16 Temporary Uses
- 5.06 Home Occupation
- 5.11 Short Term Rental Housing

INSTRUCTIONS FOR CONDITIONAL USE PERMIT APPLICATION:

- 1. Answer all questions. Answers should be clear and contain all the necessary information.
- 2. In answering question 1, refer to the classification system in the Zoning Regulations.
- 3. In answering questions 2 and 3, be specific and complete. Please use a separate sheet of paper to discuss the appropriate topics.
- 4. Copy of plot plan/site plan must be submitted with each application, with all existing or proposed structures shown, and distances from each other and from the property line. *If you are submitting a plan larger than 11x17 in size, please include 7 copies.*
- 5. A separate fee made out to 'GIS' for the 'Adjoining Property Owners List'. The list will be sent directly to the Planning & Zoning office and is valid for a period of 6 months from date generated. You may also get a certified adjoining landowners list from a title company if you choose.
 - (The buffer should be 150 ft. for all areas with the following exceptions: Administrative Conditional Use Permits, standard Conditional Use Permits, and Planned Unit Development (PUD) applications within the Lakeside Zoning District require a 300 ft. buffer.)

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I hereby certify under penalty of perjury and the laws of the State of Montai other submitted forms, documents, plans or any other information submit complete, and accurate to the best of my knowledge. Should any information this application be incorrect or untrue, I understand that any approval appropriate action taken. The signing of this application signifies approval to be present on the property for routine monitoring and inspection during the Owner(s) Signature (all owners must sign)	tted as a part of this application, to be true, n or representation submitted in connection with l based thereon may be rescinded and other for the Flathead County Planning & Zoning staff
Applicant Signature (if different than above)	Date